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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

## Complete if Known

Application No.	10/766,148
Filing Date	January 27, 2004
First Named Inventor	Yoshihide SENZAKI
Examiner Name	CAO, PHAT X
Group Art Unit	2814
Attorney Docket No.	A-70028-2/MSS (463035-964)

Total Number of Pages in This Submission **10**

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	<b>return postcard</b>
<input type="checkbox"/> Form SB/8A and (4) references	<input type="checkbox"/> CD, No. of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Maria S. Swiatek, Reg. No. 37,244 DORSEY & WHITNEY LLP 555 California Street, Suite 1000 San Francisco, CA 94104-1513 (415) 781-1989	Customer Number 32940
Signature		
Date	October 13, 2006	

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with Sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:				10/13/06
Typed or printed name	Kari Bateman Aguiar			
Signature		Date	October 13, 2006	



**AMENDMENT  
FEE CALCULATION  
(FY 2005)**

*Complete if Known*

Application No.	10/766,148
Filing Date	January 27, 2004
First Named Inventor	Yoshihide SENZAKI
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Examiner Name	CAO, PHAT X
Atty. Docket Number	A-70028-2/MSS (463035-964)

Claims as Amended in Response to Office Action dated: July 13, 2006

METHOD OF PAYMENT (Check One)		AMENDMENT FEE CALCULATION (Continued)			
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account No.: 50-2319 Deposit Account Name: DORSEY & WHITNEY LLP <input checked="" type="checkbox"/> Charge any additional fee required under 37 C.F.R. 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status (see 37 C.F.R. 1.27)		3. ADDITIONAL FEES			
2. <input type="checkbox"/> Check Enclosed		Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid
		120	60	Extension for reply within first month	
		450	225	Extension for reply within second month	
		1,020	510	Extension for reply within third month	
		1,590	795	Extension for reply within fourth month	
		2,160	1,080	Extension for reply within fifth month	
		500	250	Notice of Appeal	
		500	250	Filing a brief in support of an appeal	
		1,000	500	Request for oral hearing	
		130	65	Terminal Disclaimer Fee	
		500	250	Petition to revive – unavoidable	
		1,500	750	Petition to revive – unintentional	
		790	395	Utility/Reissue issue fee (inc. 10 advance copies)	
		130	130	Petitions to the Commissioner	
		180	180	Submission of IDS	
		790	395	Request for Continued Examination (RCE)	
		Other fee (specify):			
		Subtotal (2)			\$
		Total Amount of Payment:			\$0

1. EXTRA* CLAIM FEES					
Claims Remaining after Amendment	Highest Number Previously Paid for	Present Extra	Fee from Below*	Additional Fee	
Total 12	20	= 0	x	=	
Indep. 3	3	= 0	x	=	
First Presentation of Multiple Dependent Claim			x	=	
Subtotal (1)					

\*Calculation of Extra Claim Fees

Large Entity Fee	Small Entity Fee	Fee Description
50	25	Claims in excess of 20
200	100	Independent claims in excess of 3
360	180	Multiple dependent Claim
200	100	Reissue independent claims over original patent
50	25	Reissue claims in excess of 20 and over original patent

Submitted by:

Name: Maria S. Swiatek	Reg. No.: 37,244	Telephone: 650-857-1717
DORSEY & WHITNEY LLP	555 California Street, Suite 1000 San Francisco, California 94104-1513	CUSTOMER NUMBER 32940
Signature:		Date: October 13, 2006



Attorney Docket No.: A-70028-2/MSS (463035-964)

**UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:

**Yoshihide SENZAKI**

Serial No.: **10/766,148**

Filed: **January 27, 2004**

For: **MULTILAYER HIGH  $\kappa$   
DIELECTRIC FILMS AND METHOD  
OF MAKING THE SAME**

Examiner: **CAO, Phat X**

Group Art Unit: **2814**

Confirmation No.: **1972**

San Francisco, CA 94104-1513

Date: **October 13, 2006**

**AMENDMENT AND RESPONSE TO OFFICE ACTION**

Mail Stop AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed on July 13, 2006, please consider the following proposed amendments to the above-identified application and the remarks herein.

**List of Claims** begins on page **2** of this paper.

**Remarks** begin on page **4** of this paper.